

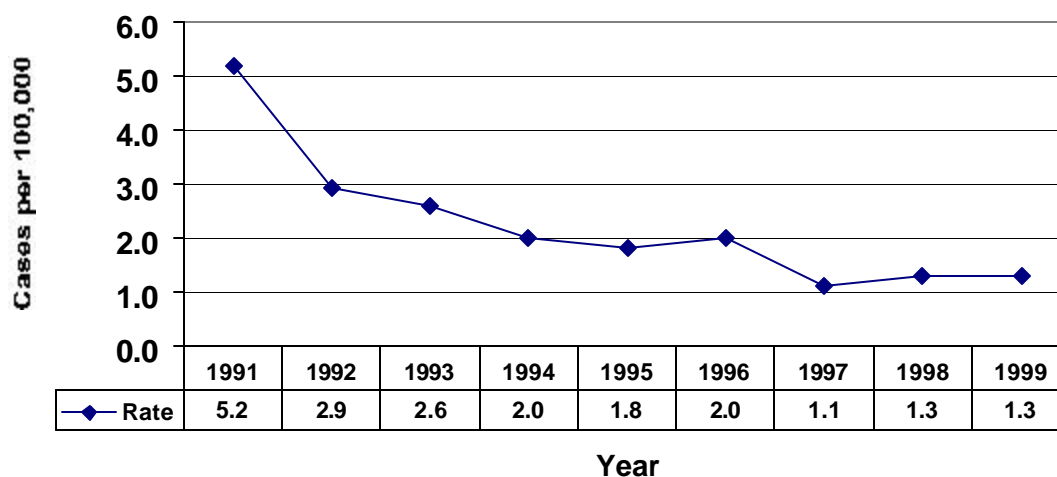
HEPATITIS B, ACUTE

Acute Hepatitis B is an illness with insidious onset of symptoms including anorexia, vague abdominal discomfort, nausea, vomiting, sometimes arthralgias and rash, often progressing to jaundice. The hepatitis B virus (HBV) is transmitted from person to person primarily through exposure to blood or other body fluids of infected persons. Infection can occur through sexual contact, injecting drug use, occupational exposure in healthcare settings, perinatal exposure, and household contact with a carrier. Only a small proportion of infections are clinically recognized. Five to ten percent of infected adults and ninety percent of infected infants become carriers. These individuals have a significantly higher risk of developing some form of serious liver disease in the future.

Laboratory Criteria for Confirmation:

- IgM antibody to hepatitis B core antigen (anti-HBc) positive (if done) or a positive test for hepatitis B surface antigen (HBsAg).
- IgM anti-HAV negative (if done).

Acute Hepatitis B Incidence, Kentucky 1991-1999



	1998	1999
Number of Cases	49	50
Rate per 100,000	1.3	1.3

Rate by Gender (per 100,000)

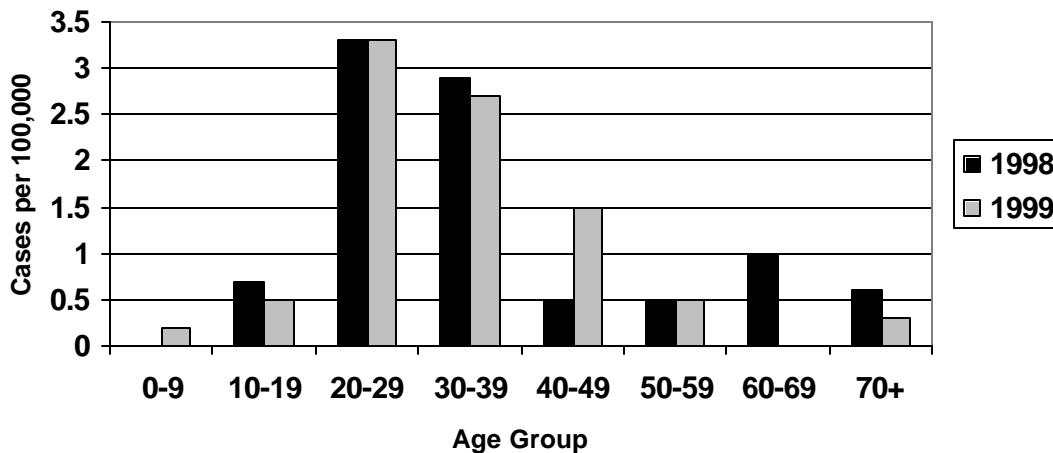
Female	1.0	1.1
Male	1.6	1.5

Rate by Race (per 100,000)

White	1.0	1.0
Black	3.5	2.8

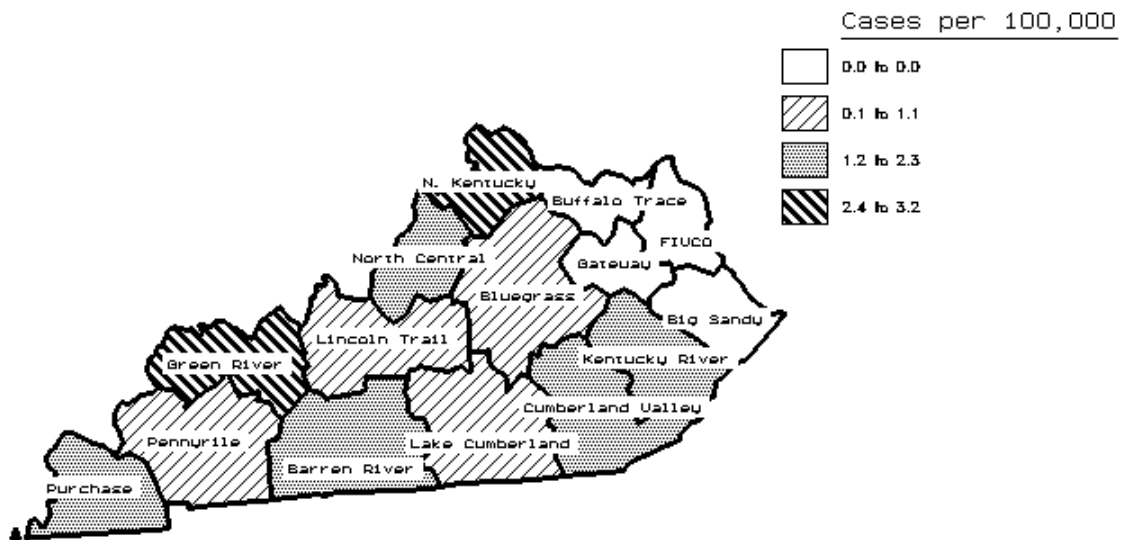
The race was unknown for 3 cases in 1998 and for 3 cases in 1999. One case was Asian in 1999.

**Acute Hepatitis B Age-Specific Incidence
Kentucky, 1998-1999**



The 20-29 year age group reported the highest incidence in both years (3.3 per 100,000), followed by the 30-39 year age group.

Acute Hepatitis B by District, Kentucky Average Annual Incidence, 1998-1999



The Buffalo Trace, Gateway, Fivco and Big Sandy Districts did not report any cases in either 1998 or 1999. The Green River District reported the highest average annual incidence of 3.2 cases per 100,000, followed by the Northern Kentucky District with 3.1 cases per 100,000.